

Helping Hands 5K run/1 MILE WALK and 25K Duathlon

When: September 10, 2016

Location: SMMHC Pavilion 1010 West Columbia Farmington, Mo

Pre-registration at 7:00 Events begin at 8:00

Choose Event 5K Run _____ 25K Duathlon _____ 1-Mile Walk _____

Adult Shirt Size: (CIRCLE ONE) S M L XL 2XL

Youth shirt size (Circle one) S M L

Gender: Male / Female (circle one)

Age on date of the event _____

Questions contact: Rick Koppeis (573) 218-6147 or Rick.Koppeis@dmh.mo.gov

Full Name: _____

Mailing Address: _____

City: _____ State/Province: _____ Zip/Postal _____

Cell phone: (_____) _____

Phone: (_____) _____ Email _____

RACE FEE: \$25 5K run or 1 mile walk

\$30 25K Duathlon (5K run and 20K bike ride) register early race shirts limited

RACE *WAIVER* AND RELEASE

(Participant must sign in order to be eligible to participate in Race): I understand that my consent to these provisions is given in consideration for being permitted to participate in this Event. I further understand that I may be removed from this competition if I do not follow all the rules of this Event. I am a voluntary participant in this Event, and in good physical condition. I know that this Event is a potentially hazardous activity and I hereby voluntarily assume full and complete responsibility for, and the risk of, any injury or accident that may occur during my participation in this Event or while on the premises of this Event. I, for myself, my next of kin, my minor children that attend the Event, my heirs, administrators, and executors, hereby release and hold harmless and covenant not to file suit against any Event sponsors, the City of Farmington, St. Francois county, Southeast Missouri Mental Health Center, Missouri Department of Mental Health, Helping Hands and their agents and employees, and all other persons or entities associated with this Event (collectively, the "Releasees") for any injury or damages I might suffer in connection with my participation in this Event or while on the premises of this Event. This release applies to any and all loss, liability, or claims I may have arising out of my participation in this Event, including but not limited to, personal injury or damage suffered by me or others, whether such losses, liabilities, or claims be caused by falls, contact with and/or the actions of other participants, contact with fixed or non-fixed objects, contact with animals, people, and/or vehicles, conditions of the premises of the Event, negligence of the Releasees, risks not known to me or not reasonably foreseeable at this time, or otherwise. PHOTOGRAPHIC RELEASE: I give my full consent and permission to the Event sponsors, the City of Farmington, their successors, licensees, and assigns the Irrevocable right to use, for any purpose whatsoever and without compensation, any photographs, videotapes, audiotapes, or other recordings of me that are made during the course of this event (the "Event").

SIGNATURE _____ DATE _____